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CONFIRMATION NO. 4159

SERIAL NUMBER 10/584,454	FILING OR 371(c) DATE 02/15/2007 RULE	CLASS 435	GROUP ART UNIT 1637	ATTORNEY DOCKET NO.	
APPLICANTS Sarman Singh, New Delhi, INDIA; ** CONTINUING DATA ***** This application is a 371 of PCT/IN04/00395 12/22/2004 ** FOREIGN APPLICATIONS ***** INDIA 1598/DEL/2003 12/23/2003 IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/02/2007					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY INDIA	SHEETS DRAWING 1	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 4
ADDRESS AIR MAIL SARMAN SINGH DIVISION OF CLINICAL MICROBIOLOGY ALL INDIA INSTITUTE OF MEDICAL SCIENCES NEW DELHIA 110 029, INDIA					
TITLE Oligonucleotides for detection of leishmaniasis and methods thereof					
FILING FEE RECEIVED 1560	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		